## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective January 1, 2003

10-620-695

| CLAIMS AS FILED - PART I (Column 1) |  |   |                                     |                               |                      | mn 2)                         | SMALL ENTITY TYPE |              |                        | OR        | OTHER THAN OR SMALL ENTITY |                        |
|-------------------------------------|--|---|-------------------------------------|-------------------------------|----------------------|-------------------------------|-------------------|--------------|------------------------|-----------|----------------------------|------------------------|
| TOTAL CLAIMS                        |  |   | 19                                  |                               |                      |                               |                   | Ξ            | FEE                    |           | RATE                       | FEE                    |
| FOR                                 |  |   | NUMBER FILED                        |                               | NUMBER EXTRA         |                               | BASIC             | EE           | 375.00                 | OR        | BASIC FEE                  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS             |  |   | minus 20=                           |                               | * 0                  |                               | X\$ 9             | =            |                        | OR        | X\$18=                     |                        |
| INDEPENDENT CLAIMS                  |  |   | 2 minus 3 =                         |                               | * 0                  |                               | X42:              | =            |                        | OR        | X84=                       |                        |
| MU                                  | LTIPLE DEPEN                                   | IDENT CLAIM P                             | RESENT                              |                               |                      |                               | +140              | =            |                        | OR        | +280=                      |                        |
| * If                                | the difference                                 | in column 1 is                            | less than ze                        | ero, enter                    | r "0" in c           | "0" in column 2               |                   | Ĺ            |                        | OR        | TOTAL                      | 750                    |
|                                     | С  | LAIMS AS A                                | - PAR                               | PART II                       |                      |                               | -                 |              |                        | OTHER     |                            |                        |
| (Column 1)                          |  |   |                                     | (Colum                        |                      | (Column 3)                    | SMAI              | SMALL ENTITY |                        | OR        | SMALL                      |                        |
| AMENDMENT A                         |  | REMAINING<br>AFTER<br>AMENDMENT           |                                     | NUM<br>PREVIO<br>PAID         | BER<br>OUSLY         | PRESENT<br>EXTRA              | RATI              | =            | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                     | Total  | *   | Minus                               | **                            |                      | =                             | X\$ 9             | -            |                        | OR        | X\$18=                     |                        |
|                                     | Independent                                    | *   | Minus                               | ***                           |                      | =                             | X42=              | =            |                        | OR        | X84=                       |                        |
| <u> </u>                            | FIRST PRESE                                    | NTATION OF M                              | JLTIPLE DEI                         | PENDEN                        | CLAIM                |                               | +140              | _            | ,                      | OR        | +280=                      |                        |
|                                     |  |   |                                     |                               |                      |                               | TO                |              |                        |           | TOTAL                      |                        |
|                                     |  | (Column 1)                                |                                     | (Colur                        | mn 2)                | (Column 3)                    | ADDIT. F          | EE L         |                        | J • · · · | ADDIT. FEE                 |                        |
| AMENDMENT B                         |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                     | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA              | RATE              |              | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                     | Total  | *   | Minus                               | **                            |                      | =                             | X\$ 9             | _            |                        | OR        | X\$18=                     |                        |
|                                     | Independent                                    | *   | Minus                               | ***                           |                      | =                             | X42=              |              | FI 1                   | OR        | X84=                       |                        |
|                                     | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                     |                               |                      |                               |                   | ᅥ            |                        | OH        |                            |                        |
|                                     |  |   |                                     | •                             |                      |                               | +140              |              | <u>-</u>               | OR        | +280=                      |                        |
|                                     |  |   |                                     |                               |                      |                               |                   | AL<br>EE     |                        | OR        | TOTAL<br>ADDIT. FEE        |                        |
|                                     |  | (Column 1)<br>CLAIMS                      |                                     | (Colur                        |                      | (Column 3)                    |                   |              |                        | 7         |                            |                        |
| AMENDMENT C                         |  | REMAINING<br>AFTER<br>AMENDMENT           |                                     | NUM<br>PREVIO<br>PAID         | BER<br>OUSLY         | PRESENT<br>EXTRA              | RATE              |              | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                     | Total  | *   | Minus                               | **                            |                      | =                             | X\$ 9:            |              |                        | OR        | X\$18=                     | -                      |
|                                     | Independent                                    | *   | Minus                               | ***                           | 5 01 4 11 4          | =                             | X42=              |              |                        | OR        | X84=                       |                        |
| <u> </u>                            | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                     |                               |                      |                               | +140:             | 1            |                        | OR        | +280=                      |                        |
| *                                   | f the entry in colu                            | mn 1 is less than the mber Previously Pa  | né entry in colu<br>aid For" IN THE | mn 2, write                   | e "0" in co          | lumn 3.<br>in 20. enter "20." | TOT               | AL           |                        |           | TOTAL                      |                        |
| ***                                 | If the "Highest Nu                             | mber Previously Panber Previously Pa      | aid For" IN TH                      | IS SPACE                      | is less tha          | n 3. enter "3."               | ADDIT. F          |              | ropriate box           |           | ADDIT. FEE  <br>umn 1.     |                        |